

Comments on FCC Docket 02-60

These remarks are in response to the Second Report and Order, Order on Reconsideration, and Further Notice of Proposed Rulemaking released by the FCC on February 7, 2005. In addition, these remarks address the implementation of the new rural definitions released by the FCC in its Proposed Order and Rulemaking approved on December 15, 2004.

BACKGROUND

The California Telemedicine and eHealth Center (CTEC) is pleased to submit the following comments in response to the Commission's report entitled "Broadband Deployment in California."

CTEC is a statewide resource center for health care service providers interested in using health technologies to provide access to healthcare and health education. Funded by The California Endowment, CTEC's mission is to reduce health disparities through strategic application of telecommunications and eHealth technologies. To do so, CTEC's major goal is to support telemedicine and eHealth networks that strengthen local systems of care and enhance community-based collaborations.

Since 1997, CTEC has funded more than 100 Telemedicine/eHealth projects throughout California to provide access to a variety of medical services including but not limited to cardiology, pediatric emergency care, mental health, neonatal intensive care, dentistry, ophthalmology, and health education. There has been an increase in the use of Telemedicine and eHealth technologies, which has improved access to healthcare in both urban and rural areas. Significant investments (private, state, and federal dollars) have gone into establishing these programs. They (who's they? The investments or Telemedicine and eHealth) are providing a much needed service and enable access to specialty care that would not be available without this technology. Most of these Telemedicine programs require broadband.

CTEC has been pleased to see rural communities across California benefit from having access to critically needed healthcare services provided through the many CTEC funded Telemedicine/eHealth programs. CTEC's current focus is on developing Regional eHealth networks to strengthen rural communities' capacity to manage health needs of their communities locally. The main reasons to support rural health care in this method is to promote early detection and treatment for rural residents, to support rural healthcare physicians and other healthcare providers, and to provide access to medical

education that is required by licensure for physicians/other healthcare providers in California.

The cost of healthcare in California continues to grow as our population ages. Most of our healthcare dollars are required by the elderly who compromise a large and growing number of rural residents. It is costly and very difficult to transport the elderly for healthcare to urban areas and unnecessary when Telemedicine programs can connect rural physicians and their patients to specialist in much less costly methods-using health technologies. California's rural communities need broadband for Telemedicine and distance learning. Access to broadband is key to decreasing the growing digital divide between urban and rural California.

Internet Access. We are pleased that the FCC recognizes that Internet access is an important component of technology services needed by rural health providers. Rural residents who do have access to the Internet use it every day to obtain necessary health care information, bill for medical services, and communicate with patients and colleagues. The Internet supported by broadband is a vital piece of every day communications and requires a sufficient subsidy for rural communities. High speed Internet is sometimes not available in rural areas due to lack of infrastructure.

Support for Mobile Rural Health Providers. CTEC has funded Mobile Telemedicine/eHealth programs, such as ophthalmology, dentistry, and mental healthcare, in rural areas where these services are otherwise not available at all. The mobile Telemedicine programs reach out to some of the most remote and underserved communities in our state but have primarily relied upon grant funding. It is more cost effective for the state to have rural communities receive healthcare in their own communities when possible - which is what mobile Telemedicine programs can accomplish. CTEC believes the universal service funds should be used to offset the costs for mobile healthcare providers whether they rely on satellite or microwave. Due to the inevitable advancements and changes in technology, more flexibility in this area is desirable.

Support for Infrastructure Development. CTEC convenes rural communities as part of its work to evaluate and access the healthcare needs of communities across our state. A common area of concern and a request from rural communities is having the infrastructure to allow them to access the Internet over broadband. The "last-mile" issue is a significant barrier to many rural health providers. CTEC would suggest that the FCC make universal service funds available to support the installation and operation of infrastructure to support broadband services in rural communities. Without investment in "last-mile" technologies, rural communities and their rural

health providers will continue to lag behind in using technologies to support health care services.

Thank you for the opportunity to comment on this important program.

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